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PTO/SB/01 (10-00)

Approved for use through 10/31/2002, OMB 0651-0032

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted With Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)  
**OR**

<b>Attorney Docket Number</b>		PU020299
<b>First Named Inventor</b>		Carl L. Christensen, et al.
<b><i>COMPLETE IF KNOWN</i></b>		
<b>Application Number</b>	/	
<b>Filing Date</b>		
<b>Group Art Unit</b>		
<b>Examiner Name</b>		

Rec'd PCT/PTO 16 DEC 2004

**As a below named inventor, I hereby declare that:**

**My residence, post office address, and citizenship are as stated below next to my name.**

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## LINEARLY EXPANDABLE BROADCAST ROUTER APPARATUS

**the specification of which** *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) 06/16/2003 as United States Application Number or PCT International

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/390,358	06/21/2002	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

**Burden Hour Statement:** This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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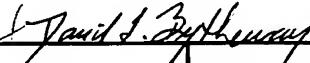
## DECLARATION — Utility or Design Patent Application

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Direct all correspondence to:  Customer Number \_\_\_\_\_ OR  Correspondence address below

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Country USA	Telephone (609) 734-6834	Fax (609) 734-6888	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>CARL L.</u>		Family Name <u>CHRISTENSEN</u> or Surname	
Inventor's Signature 	Date <u>13 Jan 2003</u>		
Residence: City <u>South Jordan</u>	State <u>Utah</u>	Country <u>UT</u>	Citizenship <u>US</u>
Mailing Address Mailing Address 2360 Bridle Oak Drive			
City <u>South Jordan</u>	State <u>Utah</u>	ZIP 84095	Country <u>US</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>DAVID LYNN</u>		Family Name <u>BYTHEWAY</u> or Surname	
Inventor's Signature 	Date <u>31 Oct 2003</u>		
Residence: City <u>Murray</u>	State <u>Utah</u>	Country <u>UT</u>	Citizenship <u>US</u>
Mailing Address Mailing Address 5957 Blue Stone Circle			
City <u>Murray</u>	State <u>Utah</u>	ZIP 84095	Country <u>US</u>
<input type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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**DECLARATION**
**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
**Page 3 of 3**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
MITCHELL, T.		HAYDEN			
Inventor's Signature	<i>T. Mitchell J. Hayden</i>			Date <u>13 July 03</u>	
Residence: City	Syracuse	State	Utah <u>UT</u>	Country	US
Citizenship					
Mailing Address					
Mailing Address 1530 South 1525 West					
City Syracuse	State	Utah	ZIP 84075	Country	US
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature				Date	
Residence: City	State	Country	Citizenship		
Mailing Address					
Mailing Address					
City	State	Zip	Country		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature				Date	
Residence: City	State	Country	Citizenship		
Mailing Address					
Mailing Address					
City	State	Zip	Country		

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